UNITED STATES ENVIRONMENTAL PROTECTION AGENCY - REGION 2 Division of Enforcement & Compliance Assistance - Air Compliance Branch (DECA-ACB) 290 Broadway - 21st Floor;New York, NY 10007-1866

		NOTIFICATION OF DEMOLITION AND RENOVAT	TION					
Operator Project #	Postmark	Date Received		Notification	า			
		I / R = Revised / E = Emergency/C = Cancelled) : R						
		wner, removal contractor, and other operator)						
OWNER NAME: New Jerse	y Turnpike Au	ıthority						
Address: 581 Main Street								
city: Woodbridge		State: NJ		ZIP: 07095				
Contact: Robert Wowensdorf				Tel: (732)442-8600				
REMOVAL CONTRACTOR	: APS Con	tracting, Inc.		•				
Address: 155-161 Penn	sylvania A	venue						
City: Paterson		State: NJ		ZIP: 0750	IP: 07503			
Contact: Svetozar Sav	vreski			Tel: (973	Tel: (973) 754-1980			
OTHER OPERATOR:						-		
Address:						~		
City:		State:		ZIP:)·			
Contact:				Tel:	al:			
III. TYPE OF OPERATION	(D = Demolit	ion / O = Ordered Demolition/R = Renovation/E = Emerger	ncy) : D					
IV. IS ASBESTOS PRESEN	NT? (Yes/No)	: Yes			-24/4			
V. FACILITY DESCRIPTIO	N (include bui	ilding name, number and floor or room number):						
Building Name: Existing	Maintena	nce Building						
Address: MP E111.5								
City: Secaucus State: NJ		State: NJ		County: Hudson County				
Site Location: Through	out Buildir	ng						
Building Size: SqMeter:	SqFt:	# of Floors: 1Floors		Age in Years: Since 19			960	
6,900sq.ft Present Use: Building C	900sq.ft 6,900 t							
		CAL METHOD, IF APPROPRIATE, USED TO DETECT TI	HE DDE	SENCE				
OF ASBESTOS MATER	RIAL:		HE FIXE	SENCE				
Laboratory Testing	ру вю те	rra Environmental Solutions LLC						
		EMOVED AND NON-FRIABLE ASBESTOS MATERIAL IFY THE AMOUNT OF ASBESTOS BELOW:			Non-friab	le .	Indicate Unit of Measurement below	
Regulated ACM to be removed Category I ACM not removed			RAC		Asbestos Material			
3. Category II ACM not removed			to b	oe noved	not to be			
not removed					Cat I	Cat II	UNIT	

VII. APPROXIMATE OF RACM TO BE REMOVED AND NON-FRIABLE ASBESTOS MATERIAL THAT WILL NOT BE REMOVED. SPECIFY THE AMOUNT OF ASBESTOS BELOW: 1. Regulated ACM to be removed 2. Category I ACM not removed 3. Category II ACM not removed		Non-friab Asbestos Material not to be Cat I		Indicate Unit of Measurement below		
Thruout Bldg -VAT	8,448			SF		
Thruout Bldg – Fiberglass Wall Ins/Cement Board/Panels-Transite	324			SF		
EC Rm 1038 – Mastic/Cork Floor Tile				SF		
EC Rm 1040 – Cement Piping/Pipe Insulation	22			LF		
III. SCHEDULED DATES OF ASBESTOS REMOVAL:(MM/DD/YY) Start:10/31/16 Completion:11/15/16						
IX. SCHEDULED DATES OF DEMOLITION/RENOVATION:(MM/DD/YY) Start: 11/16/16 Completion:11/21/2016						

NOTIFICATION OF DEMOLITION OF	LITION AND RENOVATION (continued)			
X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION V Full Building A Demolition Include Footing &Foundation	VORK, AND METHOD(S) TO BE US	SED:		
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CO	NTDOLC TO BE HOLD TO BREHE			
ASSESTOS AT THE DEMOLITION AND RENOVATION SITE R	v the Rules and Regulation of t	ho Sato of NII Industrial		
By the rules and regulations of the state of NJ and US EPA,	Federal Guidelines & OSHA R	egulations		
		eta cz i frank		
AII. WASTE TRANSPORTER #1		· v nija		
Name: APS Contractors, Inc.				
Address: 27 East 33 rd Street				
City: Paterson	State: NJ	ZIP: 07503		
Contact Person: L. Anastasova	Telephone: (973) 754-0777			
WASTE DISPOSAL SITE -				
Name: Grows Landfill				
Address: 1000 New Ford Mill Road				
City: Morrisville	State: PA	ZIP: 19067		
Telephone: 800-869-5566				
XIII. WASTE DISPOSAL SITE -				
Name:				
Address:				
City:	State:	ZIP:		
Telephone:				
XIV. IF DEMOLITION IS ORDERED BY A GOVERNMENT AGENCY,	PLEASE IDENTIFY THE AGENCY F	BELOW		
Name: Robert Wowensdorf	Title: Owner Representativ			
Authority: New Jersey Turnpike Authority				
Date if Order (MM/DD/YY):	Date Ordered to Begin (MI	M/DD/YY) ·		
V. FOR EMERGENCY RENOVATIONS	1 - 9 ()			
Date and Hour of Emergency (MM/DD/YY): N/A				
Description of the Sudden, Unexpected Event:				
The state of the s				
Explanation of How the event caused unsafe conditions or would cause	equipment damage or an unreasona	able financial burden:		
XVI. DESCRIPTION OF PROCEDURE TO BE FOLLOWED IN THE EV	ENT THAT UNEXPECTED ASBEST	OS IS FOUND OR		
PREVIOUSLY NON-FRIABLE ASBESTOS BECOMES CRUMBLED, Building owner will be notified, amended notifications will be submitted by the submitted of	PULVERIZED OR REDUCED TO	DOMDED:		
procedures outlined in item X and XI of this form.		-		
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISION SUBPART M) WILL BE ON-SITE DURING THE DEMOLITION OR RE	.N()\/ATION AND E\/IDENOE TILA-	TTHE BEALUELL -		
THE BEET ACCOUNT FIGURED BY THIS FEROUN WILL BE AVAILABLE	FOR INSPECTION DURING NO	RMAL BUSINESS HOURS.		
(Required 1 year after propulgation).	10/21/16			
Signature of Owner/Operator				
XVIII. I CERTIE THAT THE ABOVE INFORMATION IS CORRECT.	Date			
Milly Office	10/21/2016			
Signature of Owner/Operator	Date			